

1 **BEFORE THE ARIZONA MEDICAL BOARD**

2
3 In the Matter of

4 **MAX D. LIND, M.D.**

5 Holder of License No. 4576
6 For the Practice of Medicine
In the State of Arizona.

Case No. MD-04-0887A

**CONSENT AGREEMENT FOR
SURRENDER OF LICENSE**

7 **CONSENT AGREEMENT**

8 By mutual agreement and understanding between the Arizona Medical Board
9 ("Board") and Max D. Lind, M.D. ("Respondent"), the parties hereto have agreed to the
10 following disposition of this matter.

11 1. Respondent has read and understands this Consent Agreement and the
12 stipulated Findings of Fact, Conclusions of Law and Order attached hereto ("Consent
13 Agreement"). Respondent acknowledges that he has the right to consult with legal
14 counsel regarding this matter and has done so or chooses not to do so.

15 2. By entering into this Consent Agreement, Respondent voluntarily
16 relinquishes any rights to a hearing or judicial review in state or federal court on the
17 matters alleged, or to challenge this Consent Agreement in its entirety as issued by the
18 Board, and waives any other cause of action related thereto or arising from said Consent
19 Agreement.

20 3. This Consent Agreement is not effective until approved by the Board and
21 signed by its Executive Director.

22 4. The Board may adopt this Consent Agreement of any part thereof. This
23 Consent Agreement, or any part thereof, may be considered in any future disciplinary
24 action against Respondent.
25

1 5. This Consent Agreement does not constitute a dismissal or resolution of other
2 matters currently pending before the Board, if any, and does not constitute any waiver,
3 express or implied, of the Board's statutory authority or jurisdiction regarding any other
4 pending or future investigation, action or proceeding. The acceptance of this Consent
5 Agreement does not preclude any other agency, subdivision or officer of this State from
6 instituting other civil or criminal proceedings with respect to the conduct that is the subject
7 of this Consent Agreement.

8 6. All admissions made by Respondent are solely for final disposition of this
9 matter and any subsequent related administrative proceedings or civil litigation involving
10 the Board and Respondent. Therefore, said admissions by Respondent are not intended
11 or made for any other use, such as in the context of another state or federal government
12 regulatory agency proceeding, civil or criminal court proceeding, in the State of Arizona or
13 any other state or federal court.

14 7. Upon signing and returning this Consent Agreement (or a copy thereof) to the
15 Board's Executive Director, Respondent may not revoke the acceptance of the Consent
16 Agreement. Respondent may not make any modifications to this Consent Agreement and
17 any modifications to this original document are ineffective and void unless mutually
18 approved by the parties.

19 8. If the Board does not adopt this Consent Agreement, Respondent will not
20 assert as a defense that the Board's consideration of this Consent Agreement constitutes
21 bias, prejudice, prejudgment or other similar defense.

22 9. This Consent Agreement, once approved and signed, is a public record that will
23 be publicly disseminated as a formal action of the Board and will be reported to the
24 National Practitioner Data Bank and to the Arizona Medical Board's website.

1 10. If any part of the Consent Agreement is later declared void or otherwise
2 unenforceable, the remainder of the Consent Agreement in its entirety shall remain in
3 force and effect.

4 11. Any violation of this Consent Agreement constitutes unprofessional conduct
5 and may result in disciplinary action. A.R.S. § § 32-1401(27)(r) ("[v]iolating a formal order,
6 probation, consent agreement or stipulation issued or entered into by the board or its
7 executive director under this chapter") and 32-1451.

8
9 Max D Lind, M.D.
10 MAX D. LIND, M.D.

Dated: 11-25-07

FINDINGS OF FACT

1. The Board is the duly constituted authority for the regulation and control of the practice of allopathic medicine in the State of Arizona.

2. Respondent is the holder of license number 4576 for the practice of allopathic medicine in the State of Arizona.

3. The Board initiated case number MD-04-0887A after receiving notification from a hospital that Respondent's obstetric privileges had been revoked.

4. On February 18, 2003, a twenty-two year-old female patient ("LG") was admitted to the hospital by Respondent for hyperemesis. Respondent's office records indicated LG was seen in his office on February 18, 2003. However, there were no documented history and physical or other progress notes made until February 20, 2003, which indicates Respondent did not see LG in the hospital. The hospital requires daily progress notes. LG was eventually transferred to another hospital for further care by a perinatal team.

5. On March 19, 2003, a twenty-seven year-old female patient ("KH") was admitted to the hospital at 34 weeks gestation with a history of hypertension, pre-eclampsia and a seizure. KH's blood pressure (BP) upon admission was 154/98. Hospital staff contacted Respondent; however, he did not present to evaluate KH. Respondent discharged KH by telephone with instructions to see her obstetrician in the morning.

6. On October 5, 2002, a twenty-four year-old female patient ("AL") was admitted at 41 weeks in labor. AL's BP was elevated upon arrival at 168/97 and remained elevated until Respondent took her in for a cesarean section (C-section). Respondent did not address AL's elevated BP. While preparing for the C-section, AL's BP continued to elevate, but when Respondent gave her the epidural it slightly decreased. Respondent still had not addressed AL's elevated BP. AL began spilling 3+protein, indicating a decline in

1 her neurological status. Respondent ordered magnesium sulfate. Following the C-section,
2 AL became unresponsive and Respondent ordered Narcan; however, she remained
3 unresponsive. Respondent ordered a computed tomography scan that revealed a large
4 intracerebral hemorrhage. AL subsequently died.

5 7. The standard of care requires a physician to record daily progress notes.

6 8. Respondent deviated from the standard of care because he failed to record
7 daily progress notes for LG.

8 9. The standard of care requires a physician to present to see the patient and
9 adequately evaluate that patient.

10 10. Respondent deviated from the standard of care because he did not present
11 to see KH and adequately evaluate her.

12 11. The standard of care requires a physician to promptly address a patient's
13 elevating blood pressure and administer treatment for preeclampsia.

14 12. Respondent deviated from the standard of care because he did not promptly
15 address AL's elevating blood pressure and he delayed in administering treatment for her
16 preeclampsia.

17 13. As a result of Respondent's failure to address AL's elevated blood pressure
18 AL died.

19 14. A physician is required to maintain adequate legible medical records
20 containing, at a minimum, sufficient information to identify the patient, support the
21 diagnosis, justify the treatment, accurately document the results, indicate advice and
22 cautionary warnings provided to the patient and provide sufficient information for another
23 practitioner to assume continuity of the patient's care at any point in the course of
24 treatment. A.R.S. § 32-1401(2). Respondent's records were inadequate because there
25

1 were no documented history and physical or progress notes indicating Respondent saw
2 LG in the hospital.

3 15. Respondent admits to the acts described above and that they constitute
4 unprofessional conduct pursuant to A.R.S. §32-1401(27)(e) ("failing or refusing to
5 maintain adequate records on a patient."); and A.R.S. §32-1401(27)(q) ("any conduct that
6 is or might be harmful or dangerous to the health of the patient or the public.").

7 **CONCLUSIONS OF LAW**

8 1. The Board possesses jurisdiction over the subject matter hereof and over
9 Respondent.

10 2. The Board possesses statutory authority to enter into a consent agreement
11 with a physician and accept the surrender of an active license from a physician who
12 admits to having committed an act of unprofessional conduct. A.R.S. § 32-1451(T) (2).

13 **ORDER**

14 IT IS HEREBY ORDERED THAT License Number 4576, issued to Max D. Lind,
15 M.D. for the practice of allopathic medicine in the State of Arizona, is surrendered and that
16 Max D. Lind, M.D. immediately return his wallet card and certificate of licensure to the
17 Board.

18 DATED and effective this 7TH day of FEB., 2008 ^(eod)
2007.

19 ARIZONA MEDICAL BOARD

20
21 (SEAL)



22 By: [Signature]

23 Lisa S. Wynn
24 Executive Director
25

1 ORIGINAL of the foregoing filed 2008 (as)
2 this 7th day of July, 2007 with:

3 Arizona Medical Board
4 9545 E. Doubletree Ranch Road
5 Scottsdale, AZ 85258

6 EXECUTED COPY of the foregoing mailed
7 this 7th day of July, 2007 to:
8 2008 (as)

9 Max D. Lind, M.D.
10 Address of Record

11 Chris Bangs
12 Investigational Review
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